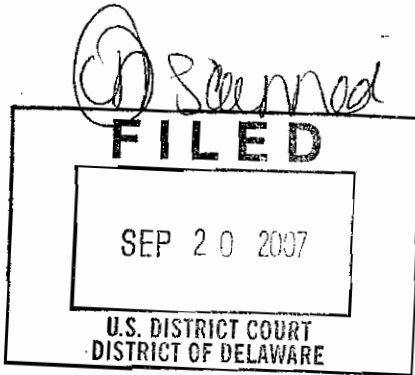


United States District Court
For the District of Delaware

Acknowledgement of Service Form
For Service By Return Receipt

Civil Action No. 05cv881 SLR



Attached below is a return receipt card reflecting proof of service upon the named party on the date shown.

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

First State Dining Corp.
d/4 Gator's Sports Bar
519 E. Basin Rd.
New Castle, DE 19720

2. Article Number

(Transfer from service label)

7005 1820 0004 3169 6381

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Barbara Demond

- ☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

9/19/07

- D. Is delivery address different from Item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type

- ☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

- ☐ Yes